PART B - FEE(S) TRANSMITTAL

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maintenance fee notifical	tions.		NI	A!C			- de-setie mailings of the		
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217	7590 03/05	/2009			Cer	tificate (of Mailing or Trans	mission ·	
XFISHERXCHRISTEN XXXXABOLX XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX					I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.				
Lisa V. Mueller Polsinelli Shughart PC 180 N. Stetson Ave., Ste. 4525					(Depositor's name)				
					(Signature)				
Chicago, IL 60	1601							(Date)	
APPLICATION NO. FILING DATE.		FIRST NAMED INVE		NTOR		ATTORNEY DOCKET NO. CO		CONFIRMATION NO.	
10/517,816	10/517.816 12/14/2004		Fabrizio Cavani			LP-2006 8610		•	
TITLE OF INVENTION: TITANIUM-VANADIUM-TIN COMPRISING CATALYST AND PROCESS FOR THE PREPARATION OF PHTHALIC ANHYDRIDE									
APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE I	DUE	PREV. PAID ISSU	E FEE	TOTAL FEE(S) DUE	DATE DUE	
nonprovisional	NO	\$1510	\$300		\$0		\$1810	06/05/2009	
EXAM	INER	ART UNIT	CLASS-SUBCLAS	s					
SOLOLA, TAOFIQ A		1625	549-248000						
I. Change of corresponde CFR 1.363). Change of correspondent Correspondent Change of Correspondent	(1) the names of up to 3 registered patent attorneys or agents OR, alternatively. (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to								
 ☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. ☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Custor Number is required. 									
3. ASSIGNEE NAME A	ND RESIDENCE DATA	TO BE PRINTED ON	THE PATENT (print	or typ	e)				
PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.									
(A) NAME OF ASSIG	(B) RESIDENCE: (CITY and STATE OR COUNTRY)								
LONZA SPA		SCANZOROSCIATE, ITALY							
Please check the appropriate assignce category or categories (will not be printed on the patent): 🔲 Individual 🗵 Corporation or other private group entity 🚨 Government									
4a. The following fee(s) are submitted: 4b. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above)									
Issue Fee		☐ A check is enclosed. ☐ Payment by credit card, Form PTO-2038 is attached.							
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5. Change in Entity Stat	s SMALL ENTITY state	is. See 37 CFR 1.27.					ITY status. See 37 C		
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Authorized Signature	Date June 4, 2009								
Typed or printed name Lisa V. Mueller			Registration No. 38,978						
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